

Fill in this information to identify the case:

Debtor name **Black Sheep Food Group, LLC**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**Case number (if known): **17-04372-5**
 Check if this is an amended filing
**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Alicia Havrish Attn: Managing Agent 1432 Van Page Road Raleigh, NC 27607</b>		<b>Business Loan</b>				<b>\$7,500.00</b>
<b>Bank of America Attn: Managing Agent PO Box 982238 El Paso, TX 79998</b>		<b>Business Line of Credit</b>				<b>\$7,500.00</b>
<b>Charles E. Potter Attn: Managing Agent 3 Carolina Meadows #303 Chapel Hill, NC 27517</b>		<b>Business Loan Father in Law of Tom Havrish</b>				<b>\$12,500.00</b>
<b>First Electronic Bank Attn: Managing Agent 2150 South 1300 East Suite 400 Salt Lake City, UT 84106</b>		<b>FundBox Business Loan</b>				<b>\$5,320.00</b>
<b>Headway Capital Attn: Managing Agent 175 W. Jackson Blvd. Chicago, IL 60604</b>		<b>Business Loan</b>				<b>\$17,000.00</b>
<b>Inland Seafood Attn: Managing Agent PO Box 450669 Tucker, GA 30084</b>		<b>Seafood Servies</b>				<b>\$6,500.00</b>

Debtor **Black Sheep Food Group, LLC**  
Name \_\_\_\_\_

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				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Kabbage Loans Attn: Managing Agent 925B Peachtree Street NE Atlanta, GA 30309</b>		<b>Business Loan</b>		<b>\$88,000.00</b>	<b>\$0.00</b>	<b>\$88,000.00</b>
<b>LG Funding, Services Attn: Managing Agent 1218 Union St. Suite 2 Brooklyn, NY 11225</b>		<b>Business Loan</b>		<b>\$40,000.00</b>	<b>\$0.00</b>	<b>\$40,000.00</b>
<b>Mary Lynn Fitzgerald Attn: Managing Agent 105 Hilsdorf Ct. Cary, NC 27513</b>		<b>Note related to purchase of Academy Street Bistro</b>				<b>\$84,000.00</b>
<b>NC Dept. of Revenue Attn: Bankruptcy Unit PO Box 1168 Raleigh, NC 27602-1168</b>		<b>Sale Taxes</b>				<b>\$21,000.00</b>
<b>Performance Food Service Attn: Managing Agent 543 12th Street Drive NW Hickory, NC 28603-2947</b>		<b>Food Services</b>				<b>\$38,000.00</b>
<b>PFS Sales Attn: Managing Agent PO Box 33255 Raleigh, NC 27636</b>		<b>Paper Products</b>				<b>\$6,000.00</b>
<b>RI Preston Investors Attn: Managing Agent 127 Trellingwood Dr. Morrisville, NC 27560</b>		<b>Lease August Rent</b>				<b>\$23,000.00</b>
<b>SOS Capital Inc. Attn: Managing Agent 540 Madison Ave. New York, NY 10022</b>		<b>Funds Frozen in Merchant Accounts</b>		<b>\$68,138.81</b>	<b>\$42,228.71</b>	<b>\$25,910.10</b>

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				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b><i>Thomas Havrish Attn: Managing Agent 1432 Van Page Blvd Raleigh, NC 27607</i></b>		<b><i>Business Loan</i></b>				<b><i>\$85,000.00</i></b>
<b><i>Todd Hovenden Attn: Managing Agent 1705 Clearwater Ave. Bloomington, IL 61704</i></b>		<b><i>Loan from Purchase of Business</i></b>				<b><i>\$40,000.00</i></b>
<b><i>US Foods, Inc. Attn: Managing Agent 1500 NC Highway 39 Zebulon, NC 27597</i></b>				<b><i>\$12,000.00</i></b>	<b><i>\$0.00</i></b>	<b><i>\$12,000.00</i></b>
<b><i>Wards Fruit and Produce, Inc. Attn: Managing Agent 1109 Apriculture Street, Suite 3 Raleigh, NC 27603</i></b>		<b><i>Purchase of Produce</i></b>				<b><i>\$9,600.00</i></b>
<b><i>Wells Fargo Bank Attn: Officer PO Box 9210 Des Moines, IA 50306</i></b>		<b><i>Business Loan</i></b>				<b><i>\$8,000.00</i></b>
<b><i>Yadkin Bank Attn: Managing Agent 200 South 6th Street Minneapolis, MN 55402</i></b>		<b><i>Business Credit Card</i></b>				<b><i>\$5,000.00</i></b>

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## Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **683,840.44****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **683,840.44****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **208,138.81****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **21,000.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **390,618.00****4. Total liabilities** .....

Lines 2 + 3a + 3b

\$ **619,756.81**

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Debtor name ***Black Sheep Food Group, LLC***United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **17-04372-5** Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?** No. Go to Part 2. Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****\$1,770.00****2. Cash on hand****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. <b>Fidelity Bank Account</b>	<b>Business Checking Account</b>	<b>5180</b>	<b>\$23,149.97</b>
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3.2. <b>Wells Fargo Negative Balance</b>	<b>Business Checking Account</b>	<b>8090</b>	<b>\$0.00</b>
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**4. Other cash equivalents (Identify all)**

4.1. <b>Funds Frozen in Merchant Account Wells Fargo</b>	<b>\$13,717.70</b>
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4.2. <b>Funds Frozen in Merchant Account American Express</b>	<b>\$9,720.43</b>
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4.3. <b>Funds Frozen in Merchant Account World Pay</b>	<b>\$18,791.28</b>
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**5. Total of Part 1.****\$67,149.38**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 1

Debtor **Black Sheep Food Group, LLC**  
NameCase number (*If known*) **17-04372-5****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- No. Go to Part 3.  
 Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. <u><b>Duke Progress Energy</b></u>	<u><b>\$1,500.00</b></u>
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7.2. <u><b>RI Preston Investors (Rental Deposit)</b></u>	<u><b>\$15,000.00</b></u>
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**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$16,500.00****Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- No. Go to Part 4.  
 Yes Fill in the information below.

**Part 4: Investments****13. Does the debtor own any investments?**

- No. Go to Part 5.  
 Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- No. Go to Part 6.  
 Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**19. Raw materials**

**Food Inventory - Lugano**  
**Includes food and beverages**

<u><b>8/30/17</b></u>	<u><b>\$0.00</b></u>	<u><b>Replacement</b></u>	<u><b>\$18,991.06</b></u>
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**Food Inventory - Academy Street Bistro**  
**Includes food and beverages**

<u><b>8/30/2017</b></u>	<u><b>\$0.00</b></u>	<u><b>Replacement</b></u>	<u><b>\$6,200.00</b></u>
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**20. Work in progress**

Debtor **Black Sheep Food Group, LLC**  
Name

Case number (*If known*) **17-04372-5**

21. Finished goods, including goods held for resale

22. Other inventory or supplies

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

**\$25,191.06**

24. Is any of the property listed in Part 5 perishable?

- No  
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No

Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No  
 Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.  
 Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.  
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture <i>Kitchen Equipment, Tables, Chairs (See attached list)</i> <i>Location: Lugano</i>	\$0.00	Liquidation	\$500,000.00

<i>Kitchen Equipment, Tables, Chairs (See attached list)</i> <i>Location: Academy Street Bistro</i>	\$0.00	Replacement	\$75,000.00
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40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

**\$575,000.00**

44. Is a depreciation schedule available for any of the property listed in Part 7?

- No

Debtor **Black Sheep Food Group, LLC**  
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Case number (*If known*) **17-04372-5**

Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No  
 Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.  
 Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

No. Go to Part 10.  
 Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.  
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations <u>Loyalty Club Email List</u>	<u>Unknown</u>		<u>Unknown</u>

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No  
 Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

Official Form 206A/B Schedule A/B Assets - Real and Personal Property

page 4

Debtor **Black Sheep Food Group, LLC**  
Name

Case number (*If known*) **17-04372-5**

- No. Go to Part 12.  
 Yes Fill in the information below.

Debtor Black Sheep Food Group, LLC  
NameCase number (*If known*) 17-04372-5**Part 12: Summary****In Part 12 copy all of the totals from the earlier parts of the form**

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$67,149.38</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$16,500.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$25,191.06</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$575,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$683,840.44</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$683,840.44</u>

Asset ID	Placed in service	Lugano Assets
<i>Location: 1060 Darrington Drive Cary, NC</i>		
002229	Worktable Tabco Model #Kss-307 03/31/2003 SL100FM	
002230	Wall Shelf 03/31/2003 SL100FM	
002231	Food Warmers Model 72000 03/31/2003 SL100FM	
002232	Pan Racks Tabco Model 03/31/2003 SL100FM	
002233	Refrigerated Prep Table 03/31/2003 SL100FM	
002234	Mobile Ice Bin 03/31/2003 SL100FM	
002235	Hot Food Table 03/31/2003 SL100FM	
002236	Refrig Prep Table Randell Model 03/31/2003 SL100FM	
002237	Pickup Counter 03/31/2003 SL100FM	
002238	Double Tier Overshelf 03/31/2003 SL100FM	
002239	Wall Shelf 03/31/2003 SL100FM	
002240	Heat Lamp 03/31/2003 SL100FM	
002241	Reach in Fridge 03/31/2003 SL100FM	
002242	Utility Cart 03/31/2003 SL100FM	
002243	Counter Hotplate 03/31/2003 SL100FM	
002244	Wall Mounted Fill Faucet 03/31/2003 SL100FM	
002245	Refridge Equip Stand Randell Model 03/31/2003 SL100FM	
002246	Pasta Cooker Gas 03/31/2003 SL100FM	
002247	6 Burner Range w/ convection oven 03/31/2003 SL100FM	
002248	4 Burner Range w/ Griddle & Convection Oven 03/31/2003 SL100FM	
002249	Walmount Cheesemelters 03/31/2003 SL100FM	
002251	Stainless Steel Plate Shelves 03/31/2003 SL100FM	
002252	Fryer Pitco Frialator 03/31/2003 SL100FM	
002253	Single Deck Conveyor Pizza 03/31/2003 SL100FM	
002254	Wall Mounted Fill Faucet 03/31/2003 SL100FM	
002255	Double Deck Convection Oven 03/31/2003 SL100FM	
002256	Brasing Pan	

002270 03/31/2003 SL100FM  
4 Burner Range Jade Range  
002271 03/31/2003 SL100FM  
Stock Pot Rangers  
002272 03/31/2003 SL100FM  
Utility Cart  
002273 03/31/2003 SL100FM  
Fire Protection System  
002274 03/31/2003 SL100FM  
Exhaust Hood Stem 23'  
002275 03/31/2003 SL100FM  
Exhaust Hood Stem 19'  
002276 03/31/2003 SL100FM  
Refrigerated Prep Table  
002277 03/31/2003 SL100FM  
Floor Trough Tabco Model  
002278 03/31/2003 SL100FM  
Dough Roller  
002279 03/31/2003 SL100FM  
Island Worktable  
002281 03/31/2003 SL100FM  
Shelf Unit  
002282 03/31/2003 SL100FM  
Worktable Assembly w/2 compartment sinks  
002283 03/31/2003  
Food Slicer  
002284 03/31/2003  
Food Processor  
03/31/2003  
Wall Shelf  
03/31/2003  
Mixer, Food Hobart Model  
03/31/2003  
Wall Shelf  
03/31/2003  
Work Table  
03/31/2003  
Ingredient Bins  
03/31/2003  
Reach-in Fridge Model G20003  
03/31/2003  
Hand Sinks  
03/31/2003  
floor trough  
03/31/2003  
Microwave  
03/31/2003  
Worktable w/ sink  
03/31/2003  
Wall Shelf  
03/31/2003  
Reach In Freezer  
03/31/2003  
Reach in Freezer

Location: Cary NC

Class: Equipment

	03/31/2003	SL100FM
002285	2 Compartment walk in	
	03/31/2003	SL100FM
002286	Lot of walk in coated shelving	
	03/31/2003	SL100FM
002287	Dry storage shelving	
	03/31/2003	SL100FM
002288	Mobile ice bath	
	03/31/2003	SL100FM
002289	Walk in beer cooler	
	03/31/2003	SL100FM
002290	Beer System perlick model	
	03/31/2003	SL100FM
002291	Keg Rack	
	03/31/2003	SL100FM
002292	Shelf unit w/ dunnage bottom shelf	
	03/31/2003	SL100FM
002293	Storage Shelving	
	03/31/2003	SL100FM
002294	Liquor Storage Shelving	
	03/31/2003	SL100FM
002295	Coat Rack	
	03/31/2003	SL100FM
002296	Locker Assembly	
	03/31/2003	SL100FM
002297	Stainless Steel Wall corner guards	
	03/31/2003	SL100FM
002298	Bread Slicer	
	03/31/2003	SL100FM
002299	Panini Grill	
	03/31/2003	SL100FM
002300	Dry Storage Shelving	
	03/31/2003	SL100FM
002301	Faucet Fisher Model	
	03/31/2003	SL100FM
002302	Broom Racks	
	03/31/2003	SL100FM
002303	Pot Storage Shelving	
	03/31/2003	SL100FM
002304	Hank Sinks Model	
	03/31/2003	SL100FM
002305	Utility Shelf w/ mop holder	
	03/31/2003	SL100FM
002306	3 compartment sink	
	03/31/2003	SL100FM
002307	Wall Mounted Pot Rack	
	03/31/2003	SL100FM
002309	Dishwash exhaust hood w/ fan	
	03/31/2003	SL100FM
002310	Solid dishtable w/ rack shelf	
	03/31/2003	SL100FM
002311	Wall Shelf Assembly	
	03/31/2003	SL100FM
002312	Undercounter Refrigerator	

Location: Cary NC

Class: Equipment

002313	Chemical Self Unit	03/31/2003	SL100FM			
002314	Fridge Backbar storage cabinet	03/31/2003	SL100FM			
002315	Underbar Workboard Sink	03/31/2003	SL100FM			
002316	Fridge backbar storage cabinet	03/31/2003	SL100FM			
002317	Ice Bin & Cocktail station	03/31/2003	SL100FM			
002318	Underbar corner filer	03/31/2003	SL100FM			
002319	Ice Scoop Holder	03/31/2003	SL100FM			
002320	Blender	03/31/2003	SL100FM			
002321	Glass Rack Storage Cabinets	03/31/2003	SL100FM			
002322	Glass Rack Storage Cabinets	03/31/2003	SL100FM			
002323	Icebin/cocktail station	03/31/2003	SL100FM			
002324	Wall Shelf Assembly	03/31/2003	SL100FM			
002326	Wall Mounted Dipperwell	03/31/2003	SL100FM			
002327	Work Table	03/31/2003	SL100FM			
002328	Pain Enterprise	03/31/2003	SL100FM			
005162	Charbroiler Gas Counter - Bakers Pride XX-8	07/30/2008	SL100FM			
005365	Ice Cream Dipping Cabinet	01/28/2010	SL100FM			
005372	Use Tax	03/23/2010	SL100FM			
005415	Replacement booster heater	06/16/2010	SL100FM			
005416	Installation of booster heater	06/16/2010	SL100FM			
005417	Repairs to convection oven	06/23/2010	SL100FM			
006077	Armadillo Filter Machine	12/16/2011	SL100FM			
006248	Cary NC, Use Tax	12/27/2011	SL100FM			
006452	Espresso Machine - Rancilio Egro	07/16/2012	SL100FM			
006470	Cary Use Tax	09/04/2012	SL100FM			
006471	New Sealer and accessories	08/23/2012	SL100FM			
006503	Blender 3.5HP - Wasserstrom					

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location: Cary NC

Class: Equipment

	09/10/2012	SL100FM	100	
006535	Cary Use Tax - New Sealer and Accessories			
	10/30/2012	SL100FM		
006536	Pasta Cooker - GPC18			
	10/09/2012	SL100FM		
006820	Heated Cabinet - Alto Shamm 750-S			
	11/14/2012	SL100FM		
006855	Cary Use Tax			
	12/25/2012	SL100FM		

Subtotal: Equipment

(112)

Class: Furniture & Fixtures

001914	Art Resource		
	03/31/2003	SL100FM	
001951	Cash Item		
	03/31/2003	SL100FM	
001952	Trash Cans		
	03/31/2003	SL100FM	
001953	Urns for Wine Room		
	03/31/2003	SL100FM	
001954	End Table		
	03/31/2003	SL100FM	
001955	Pictures, decor		
	03/31/2003	SL100FM	
001987	Various Decor		
	03/31/2003	SL100FM	
001988	Commercial Flooring		
	03/31/2003	SL100FM	
002015	Coffee Table Books		
	04/22/2003	SL100FM	
002192	Chair - Shelby Williams		
	09/09/2003	SL100FM	
002614	Top select table 30x48 Soft Top		
	03/31/2003	SL100FM	
002615	Base select black wrinkle		
	03/31/2003	SL100FM	
002616	Top select 36x36 four flips soft top		
	03/31/2003	SL100FM	
002617	Base table black wrinkle		
	03/31/2003	SL100FM	
002618	Top select 36x36 soft top		
	03/31/2003	SL100FM	
002619	Base Select 30x30		
	03/31/2003	SL100FM	
002620	Top wood goods table 38x46 birch plank top		
	03/31/2003	SL100FM	
002621	Base select 28 inch		
	03/31/2003	SL100FM	
002622	Top Wood goods table 40 inch round		
	03/31/2003	SL100FM	
002623	Base Select bar height 30x30		
	03/31/2003	SL100FM	
002624	Booth 48 Select Single		
	03/31/2003	SL100FM	
002625	Booth select horseshoe		

Location: Cary NC

Class: Furniture & Fixtures

002626	chair shelby williams	03/31/2003	SL100FM	10 0
002627	barstool shelby williams	03/31/2003	SL100FM	10 0
002628	Custom stain seat by shelby williams	03/31/2003	SL100FM	10 0
002629	Table Franklin 48x180 sugar pine	03/31/2003	SL100FM	10 0
002630	Booth select 30 inch single	03/31/2003	SL100FM	10 0
002631	Top select 30x30 soft table	03/31/2003	SL100FM	10 0
002632	base 22x22 select black wrinkle	03/31/2003	SL100FM	10 0
002633	Settee select seating 120 inch	03/31/2003	SL100FM	10 0
002634	Settee select seating 146 inch	03/31/2003	SL100FM	10 0
002635	609 persimmon select seating	03/31/2003	SL100FM	10 0
002636	Bench pad seating	03/31/2003	SL100FM	10 0
003071	Skyler's Pictures	03/31/2003	SL100FM	10 0
003072	Rug	03/31/2003	SL100FM	10 0
003105	Misc. Furniture & Fixtures	03/31/2004	SL100FM	10 0
003106	Silk Plants	03/15/2004	SL100FM	10 0
003107	Pots for plants	03/09/2004	SL100FM	10 0
004195	Shelby Williams Chairs - 12	10/18/2005	SL100FM	10 0
004489	4 Flip up Table Tops	02/02/2007	SL100FM	10 0
004752	Music Box	07/13/2007	SL100FM	10 0
005401	Replace back dinning room carpet	05/24/2010	SL100FM	10 0
005414	Carpet back dinning room	06/25/2010	SL100FM	10 0

Subtotal: Furniture &

Class: Leasehold Improvements

001875.2	Chandeliers	03/31/2003
001909		03/31/2003

Location: Cary NC

*Class: Leasehold Improvements*

001948	Telephone System		
	03/31/2003	SL100FM	
001950	Kay Lynch		
	03/31/2003	SL100FM	
001992	Leasehold Impr		
	03/31/2003	SL100FM	
002018	Economy Exterminators - Fly light		
	05/01/2003	SL100FM	
002019	Door Locks		
	04/22/2003	SL100FM	
002020		Landlord for construction-75%	
002103	Per Mar Security System		
	03/31/2003	SL100FM	10 0
002145	Art Glass		
	03/31/2003	SL100FM	25 0
002146	Leasehold Improvements		
	08/12/2003	SL100FM	25 0
002353	CD Audio Loader		
	10/07/2003	SL100FM	10 0
002993	Telephone System - APC UPC & lodging		
	12/08/2003	SL100FM	10 0
003045	Ryan Companies - 75%		
	03/31/2003	SL100FM	25 0
003046	Ryan Companies - 25%		
	03/31/2003	SL100FM	10 0
003055	Ryan Companies - 75%		
	03/31/2003	SL100FM	25 0
003056	Ryan Companies - 25%		
	03/31/2003	SL100FM	10 0
003069	Aaron Carlson - Millwork		
	03/31/2003	SL100FM	10 0
003070	Ryan Companies - 25%		
	03/31/2003	SL100FM	10 0
004221	Water Pump		
	02/02/2006	SL100FM	25 0
004737	New A/C Compressor- Labor		
	05/10/2007	SL100FM	25 0
005006	Panels- Close in bar area		
	11/23/2007	SL100FM	25 0
005316	100 Gallon 150,000 BTU Water Heater		
	09/10/2009	SL100FM	25 0
006533	Replacement black iron run / weld on hood		
	10/11/2012	SL100FM	15 0
006534	Hinges on hood fans		
	10/18/2012	SL100FM	15 0

*otherwise Computer Equipment*

001925.22	Aloha Hardware		
	03/31/2003	SL100FM	5 0
001959	Safe		
	03/31/2003	SL100FM	5 0
001998	Lodging		

## Class: Office Equipment

	03/31/2003	SL100FM	5 0
002352	Wi Fi System 11/13/2003	SL100FM	5 0
002979	Aloha Software 03/31/2003	SL100FM	3 0
002980	Aloha 03/31/2003	SL100FM	5 0
004203	Aloha Server 12/15/2005	SL100FM	5 0
004237	Aloha server 02/21/2006	SL100FM	5 0
005122	5 POS Terminals 12/03/2007	SL100FM	5 0
005195	Dell Computer 03/17/2008	SL100FM	5 0
005198	Firewall 11/04/2008	SL100FM	5 0
005373	Replacement Printer 10/05/2008	SL100FM	5 0
005537	Aloha Software for Key 29232 03/22/2010	SL100FM	5 0
005561	Aloha Software for Key 29232 02/15/2011	SL100FM	3 0
005586	All in one printer 04/19/2011	SL100FM	5 0
005587	Support for printer 04/28/2011	SL100FM	5 0
006311	New Dell 1510X Projector and Lamp 02/07/2012	SL100FM	5 0

2 door Turbo Air sandwich prep unit 8'  
True sandwich prep unit  
7'x7' walk in cooler  
Bunn coffee machine  
True Double door fridge  
CO2 tanks  
Soda rack  
2-5 shelf units  
88" SS shelf  
Clean & dirty dishwater shelves  
Rubbermaid cart  
2 hand sink  
2 bakers racks - small  
1 stand up freezer - next to door outside  
2 Adcraft steamers  
Small Turbo Air freezer  
4 drawer refrigerated work station  
3'x8' SS work table  
12' double SS shelf  
33" wide table  
3 compartment dish sink  
40" wide SS shelf  
7" SS shelf & dry rack  
4 unit shelf  
3 48" wide SS prep sinks  
2 - 6"SS shelves  
2 - 4' SS shelves  
1 - 3' SS shelf  
3 - SS shelves  
1 Small shelf unit  
Mop sink  
Dry storage area with shelves  
Miscellaneous pots, pans, smallware, dishes, glassware, plasticware

**Vendor owned**

Dishwasher  
Ice machine

### **Academy Street Bistro Equipment List**

#### **Occupancy 88**

##### **Bar**

4 tap Tru Kegerator  
Granite Bar with 9 Bar Stools  
2 hand sinks  
True wine refrigerator cooler  
True undercounter refrigerator  
4 52 inch LCD televisions  
Soda gun  
8 high top tables  
40 bar stools  
Hostess stand  
New track lighting and ceiling fan

##### **Office**

Stereo, amplifier with 4 speakers inside and 2 on patio  
Desk with file cabinet and desk chair  
Liquor storage area  
Phone system

##### **Dining Rooms**

30 Chairs  
16ft bench  
2 6-person booths  
13 tables  
Built in cabinet with granite top and overhead wine rack  
New track lighting and ceiling fan

##### **Patio**

9 tables  
38 chairs  
5 outdoor umbrella  
1 large shade awning

##### **Kitchen**

4'x11' hood over cooking line  
Double basket fryers  
10 eye double Southbend stove  
Southbend salamander  
Champion chargrill

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NORTH CAROLINAIN THE MATTER OF:  
**Black Sheep Food Group, LLC**  
Debtor(s).CASE NUMBER:  
**17-04372-5**

## SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, Thomas S. Havrish, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
<b>-NONE-</b>						

Debtor's Age:

Name of former co-owner: \_\_\_\_\_

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ **0.00**

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
<b>-NONE-</b>						

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ **0.00**

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 0.

Description of Property	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
<b>-NONE-</b>						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ **0.00**

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
<b>-NONE-</b>						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ **0.00**

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured>Last Four Digits of Policy Number\Beneficiary(if child, initials only)		Cash Value
<b>-NONE-</b>		

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
<b>-NONE-</b>

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity
<b>-NONE-</b>

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market Value	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien Holder	Amount of Lien	Net Value	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
<b>-NONE-</b>						

**VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 0.00**

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account>Last Four Digits of Account Number
<b>-NONE-</b>

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan>Last Four Digits of Account Number\Value\Initials of Child Beneficiary
<b>-NONE-</b>

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit>Last Four Digits of Identifying Number
<b>-NONE-</b>

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
<b>-NONE-</b>

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property and Address	Market Value	Lien Holder	Amount of Lien	Net Value
<b>-NONE-</b>				

**VALUE CLAIMED AS EXEMPT: \$ 0.00**

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

<b>-NONE-</b>	
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15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

<b>-NONE-</b>	
---------------	--

16. FEDERAL PENSION FUND EXEMPTIONS

<b>-NONE-</b>	
---------------	--

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

<b>-NONE-</b>	
---------------	--

18. RECENT PURCHASES

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market Value	Lien Holder	Amount of Lien	Net Value
<b>-NONE-</b>				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

19. The debtor's property is subject to the following claims:

- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net Value
<b>-NONE-</b>					

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL  
TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I, Thomas S. Havrish, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: September 20, 2017

/s/ Thomas S. Havrish

Thomas S. Havrish

Debtor

Fill in this information to identify the case:

Debtor name ***Black Sheep Food Group, LLC***United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **17-04372-5** Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		<i>Column A</i> Amount of claim	<i>Column B</i> Value of collateral that supports this claim
2.1	<b><i>Cap Call, LLC</i></b>  Creditor's Name <b><i>Attn: Managing Agent 122 East 42nd Street Suite 2112 New York, NY 10168</i></b>  Creditor's mailing address	Describe debtor's property that is subject to a lien <b><i>Business Loan</i></b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b><i>Unknown</i></b>  <b><i>\$0.00</i></b>
2.2	<b><i>Kabbage Loans</i></b>  Creditor's Name <b><i>Attn: Managing Agent 925B Peachtree Street NE Atlanta, GA 30309</i></b>  Creditor's mailing address	Describe debtor's property that is subject to a lien <b><i>Business Loan</i></b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply	<b><i>\$88,000.00</i></b>  <b><i>\$0.00</i></b>

Debtor **Black Sheep Food Group, LLC**

Case number (if known)

**17-04372-5**

Name

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

- Contingent  
 Unliquidated  
 Disputed

**2.3 LG Funding, Services**

Creditor's Name

**Attn: Managing Agent**  
**1218 Union St. Suite 2**  
**Brooklyn, NY 11225**

Creditor's mailing address

Describe debtor's property that is subject to a lien  
**Business Loan****\$40,000.00****\$0.00**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**2.4 Power Up Lending Group, Ltd**

Creditor's Name

**Attn: RICHARD S. NAIDICH,**  
**ESQ.**  
**111 Great Neck Road Suite**  
**214**  
**Great Neck, NY 11021**

Creditor's mailing address

Describe debtor's property that is subject to a lien  
**Business Loan****Unknown****\$0.00**

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**2.5 Queen Funding, LLC**

Creditor's Name

**Attn: Managing Agent**  
**2221 NE 164 St**  
**North Miami Beach, FL**  
**33160**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**Unknown****Unknown**

Describe the lien

Debtor **Black Sheep Food Group, LLC**  
Name

Case number (if known)

**17-04372-5****Is the creditor an insider or related party?**

- No  
 Yes

**Is anyone else liable on this claim?**

- No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**2.6 Richmond Capital Group, LLC**

Creditor's Name

**Attn: Managing Agent  
125 Maiden Lane Suite 501  
New York, NY 10038**

Creditor's mailing address

**Describe debtor's property that is subject to a lien****Unknown****Unknown**

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

**Is the creditor an insider or related party?**

- No  
 Yes

**Is anyone else liable on this claim?**

- No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**2.7 SOS Capital Inc.**

Creditor's Name

**Attn: Managing Agent  
540 Madison Ave.  
New York, NY 10022**

Creditor's mailing address

**Describe debtor's property that is subject to a lien****\$68,138.81****\$42,228.71****Funds Frozen in Merchant Accounts**

Creditor's email address, if known

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?****Is the creditor an insider or related party?**

- No  
 Yes

**Is anyone else liable on this claim?**

- No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

**As of the petition filing date, the claim is:**

Check all that apply

Debtor **Black Sheep Food Group, LLC**

Case number (if known)

**17-04372-5**

Name

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

- Contingent  
 Unliquidated  
 Disputed

2.8	<b>US Foods, Inc.</b>	Describe debtor's property that is subject to a lien	\$12,000.00	\$0.00
-----	-----------------------	--	-------------	--------

Creditor's Name

**Attn: Managing Agent**  
**1500 NC Highway 39**  
**Zebulon, NC 27597**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

## Describe the lien

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

2.9	<b>YES Funding Services, LLC</b>	Describe debtor's property that is subject to a lien	\$0.00	\$0.00
-----	----------------------------------	--	--------	--------

Creditor's Name

**Attn: Managing Agent**  
**122 E. 42nd St. Suite 2112**  
**New York, NY 10168**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No  
 Yes. Specify each creditor, including this creditor and its relative priority.

## Describe the lien

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent  
 Unliquidated  
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$208,138.81****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Debtor **Black Sheep Food Group, LLC**

Name

Case number (if known)

**17-04372-5**

Name and address

**Ariel Bouskila**  
40 Exchange Place Ste 1306  
New York, NY 10005

On which line in Part 1 did  
you enter the related creditor?

Line **2.7**

Last 4 digits of  
account number for  
this entity

**Israel Weinstein**  
68-15 Main Street, 1st Floor  
Flushing, NY 11367

Line **2.5**

**Power Up Lending Group, Ltd**  
Attn: Managing Agent  
111 Great Neck Road Suite 216  
Great Neck, NY 11021

Line **2.4**

**US Foods**  
Attn: Managing Agent  
PO Box 602221  
Charlotte, NC 28260-2211

Line **2.8**

Fill in this information to identify the case:

Debtor name ***Black Sheep Food Group, LLC***United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **17-04372-5** Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b><i>Internal Revenue Service</i></b> <b><i>Attn: Managing Agent</i></b> <b><i>PO Box 7346</i></b> <b><i>Philadelphia, PA 19101-7346</i></b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b> <b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim: <b><i>Notice</i></b>	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address <b><i>NC Dept. of Revenue</i></b> <b><i>Attn: Bankruptcy Unit</i></b> <b><i>PO Box 1168</i></b> <b><i>Raleigh, NC 27602-1168</i></b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$21,000.00</b> <b>\$21,000.00</b>
	Date or dates debt was incurred	Basis for the claim: <b><i>Sale Taxes</i></b>	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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2.3	Priority creditor's name and mailing address <b>Wake County Revenue Dept.</b> <b>Amanda Bryant, Revenue Agent</b> <b>PO Box 2331</b> <b>Raleigh, NC 27602</b>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00      \$0.00
	Date or dates debt was incurred	Basis for the claim: <b>Notice</b>	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>Alicia Havrish</b> <b>Attn: Managing Agent</b> <b>1432 Van Page Road</b> <b>Raleigh, NC 27607</b>	<b>\$7,500.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	
	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Business Loan</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <b>Alesco</b> <b>Attn: Managing Agent</b> <b>3301 Hillsborough St.</b> <b>Raleigh, NC 27607</b>	<b>\$1,987.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	
	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Linen Services</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address <b>Ample Storage</b> <b>Attn: Managing Agent</b> <b>120 James Jackson Ave.</b> <b>Cary, NC 27513</b>	<b>\$0.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	
	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Storage Building</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address <b>Ashworth Family Limited Partnership</b> <b>Attn: Managing Agent</b> <b>PO Box 98</b> <b>Cary, NC 27512</b>	<b>\$3,595.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	
	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Landlord - Lease</b> <b>August Lease</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address <b>Auto-Chlor</b> <b>Attn: Managing Agent</b> <b>3428 Benchmark Drive</b> <b>Ladson, SC 29456</b>	<b>\$800.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	
	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Equipment Lease</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.6	Nonpriority creditor's name and mailing address <b>Bank of America</b> <b>Attn: Managing Agent</b> <b>PO Box 982238</b> <b>El Paso, TX 79998</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1513</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Business Line of Credit</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,500.00</b>
3.7	Nonpriority creditor's name and mailing address <b>Capital One</b> <b>Attn: Managing Agent</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1783</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Business Credit Card</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b>
3.8	Nonpriority creditor's name and mailing address <b>Capriflavors, Inc.</b> <b>Attn: Managing Agent</b> <b>1012 Morrisville Parkway</b> <b>Morrisville, NC 27560</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Food Purchases</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,000.00</b>
3.9	Nonpriority creditor's name and mailing address <b>Charles E. Potter</b> <b>Attn: Managing Agent</b> <b>3 Carolina Meadows #303</b> <b>Chapel Hill, NC 27517</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Business Loan Father in Law of Tom Havrish</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,500.00</b>
3.10	Nonpriority creditor's name and mailing address <b>Charlie David Poindexter</b> <b>Attn: Managing Agent</b> <b>4109 Hawkins Ave.</b> <b>Sanford, NC 27330</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Electrical Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b>
3.11	Nonpriority creditor's name and mailing address <b>Chef Works</b> <b>Attn: Managing Agent</b> <b>12325 Kerran St.</b> <b>Poway, CA 92064</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Uniforms</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$310.00</b>
3.12	Nonpriority creditor's name and mailing address <b>Cintas Corporation</b> <b>Attn: Managing Agent</b> <b>PO Box 630803</b> <b>Cincinnati, OH 45263</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Linen Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,600.00</b>

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3.13	Nonpriority creditor's name and mailing address <b>City Electric Supply</b> <b>Attn: Managing Agent</b> <b>229 James Jackson Ave. Cary</b> <b>Greensboro, NC 27416</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Electrical Services</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.00</b>
3.14	Nonpriority creditor's name and mailing address <b>Ct Corporation Services</b> <b>Attn: Managing Agent</b> <b>111 8th Ave 13th Fl</b> <b>New York, NY 10011</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Notice</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.15	Nonpriority creditor's name and mailing address <b>East Coast Resources</b> <b>Attn: Managing Agent</b> <b>PO Box 1127</b> <b>Fuquay-Varina, NC 27256</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Grease Trap and Waste removal services</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$350.00</b>
3.16	Nonpriority creditor's name and mailing address <b>Easy Ice</b> <b>Attn: Managing Agent</b> <b>926 W Washington St.</b> <b>Marquette, MI 49855</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Ice Services / Machine Rental</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$125.00</b>
3.17	Nonpriority creditor's name and mailing address <b>Empire Cooler Service, Inc.</b> <b>Attn: Managing Agent</b> <b>940 W. Chicago Ave.</b> <b>Chicago, IL 60642</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Cooler Rental</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$800.00</b>
3.18	Nonpriority creditor's name and mailing address <b>First Electronic Bank</b> <b>Attn: Managing Agent</b> <b>2150 South 1300 East Suite 400</b> <b>Salt Lake City, UT 84106</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FundBox Business Loan</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,320.00</b>
3.19	Nonpriority creditor's name and mailing address <b>Fish Window Cleaning</b> <b>Attn: Managing Agent</b> <b>PO Box 170</b> <b>Morrisville, NC 27560</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Window cleaning service</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$450.00</b>

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3.20	Nonpriority creditor's name and mailing address <b>FSI Mechanical</b> <b>Attn: Managing Agent</b> <b>6518-B Old Wake Forest Road</b> <b>Raleigh, NC 27616</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Preventive HVAC Maintenance</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,260.00</b>
3.21	Nonpriority creditor's name and mailing address <b>Headway Capital</b> <b>Attn: Managing Agent</b> <b>175 W. Jackson Blvd.</b> <b>Chicago, IL 60604</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Business Loan</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,000.00</b>
3.22	Nonpriority creditor's name and mailing address <b>Inland Seafood</b> <b>Attn: Managing Agent</b> <b>PO Box 450669</b> <b>Tucker, GA 30084</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Seafood Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,500.00</b>
3.23	Nonpriority creditor's name and mailing address <b>Mary Lynn Fitzgerald</b> <b>Attn: Managing Agent</b> <b>105 Hilsdorf Ct.</b> <b>Cary, NC 27513</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Note related to purchase of Academy Street Bistro</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$84,000.00</b>
3.24	Nonpriority creditor's name and mailing address <b>NU CO2, Inc.</b> <b>Attn: Managing Agent</b> <b>PO Box 9011</b> <b>Stuart, FL 34995</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>CO2 Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$800.00</b>
3.25	Nonpriority creditor's name and mailing address <b>Paytronix</b> <b>Attn: Managing Agent</b> <b>74 Bridge St. Suite 400</b> <b>Newton Center, MA 02459</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Loyalty and Gift Card Processing</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,000.00</b>
3.26	Nonpriority creditor's name and mailing address <b>PER MAR Security Services</b> <b>Attn: Managing Agent</b> <b>PO Box 1101</b> <b>Davenport, IA 52805</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Security Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$136.00</b>

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3.27	Nonpriority creditor's name and mailing address <b>Performance Food Service</b> <b>Attn: Managing Agent</b> <b>543 12th Street Drive NW</b> <b>Hickory, NC 28603-2947</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Food Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$38,000.00</b>
3.28	Nonpriority creditor's name and mailing address <b>PFS Sales</b> <b>Attn: Managing Agent</b> <b>PO Box 33255</b> <b>Raleigh, NC 27636</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Paper Products</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,000.00</b>
3.29	Nonpriority creditor's name and mailing address <b>Prepress Solutions, Inc.</b> <b>Attn: Managing Agent</b> <b>3205 Corsham Drive</b> <b>Apex, NC 27539</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Business Cards</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$600.00</b>
3.30	Nonpriority creditor's name and mailing address <b>RI Preston Investors</b> <b>Attn: Managing Agent</b> <b>127 Trellingwood Dr.</b> <b>Morrisville, NC 27560</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Lease</u></b> <b><u>August Rent</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,000.00</b>
3.31	Nonpriority creditor's name and mailing address <b>RTR Recovery</b> <b>Attn: Managing Agent</b> <b>122 East 42nd Street Suite 2112</b> <b>New York, NY 10168</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Notice</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.32	Nonpriority creditor's name and mailing address <b>Sentry Watch, Inc.</b> <b>Attn: Managing Agent</b> <b>PO Box 10362</b> <b>Greensboro, NC 27404</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Fire Systems</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.33	Nonpriority creditor's name and mailing address <b>Shiply Farm</b> <b>1655 Linville Creek Road</b> <b>Vilas, NC 28692</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>Food Supplier</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.34	Nonpriority creditor's name and mailing address <b>Thomas Havrish</b> <b>Attn: Managing Agent</b> <b>1432 Van Page Blvd</b> <b>Raleigh, NC 27607</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$85,000.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Business Loan</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.35	Nonpriority creditor's name and mailing address <b>Todd Hovenden</b> <b>Attn: Managing Agent</b> <b>1705 Clearwater Ave.</b> <b>Bloomington, IL 61704</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$40,000.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Loan from Purchase of Business</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.36	Nonpriority creditor's name and mailing address <b>VP Coffee</b> <b>Attn: Managing Agent</b> <b>117 S. Chatham Ave.</b> <b>Siler City, NC 27344</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,200.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Coffee Supplier</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.37	Nonpriority creditor's name and mailing address <b>Wards Fruit and Produce, Inc.</b> <b>Attn: Managing Agent</b> <b>1109 Apriculture Street, Suite 3</b> <b>Raleigh, NC 27603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,600.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Purchase of Produce</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.38	Nonpriority creditor's name and mailing address <b>Waste Industries</b> <b>Attn: Managing Agent</b> <b>PO Box 580027</b> <b>Charlotte, NC 28258</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$485.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Waste Removal</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.39	Nonpriority creditor's name and mailing address <b>Wells Fargo</b> <b>Attn: Managing Agent</b> <b>PO Box 6426</b> <b>Carol Stream, IL 60197-6426</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,200.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Business Credit Card</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>6488</u>		
3.40	Nonpriority creditor's name and mailing address <b>Wells Fargo Bank</b> <b>Attn: Officer</b> <b>PO Box 9210</b> <b>Des Moines, IA 50306</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,000.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u><b>Business Loan</b></u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Debtor Black Sheep Food Group, LLC

Case number (if known)

17-04372-5

Name

3.41	Nonpriority creditor's name and mailing address <b>Yadkin Bank</b> <b>Attn: Managing Agent</b> <b>200 South 6th Street</b> <b>Minneapolis, MN 55402</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$5,000.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number _____		
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Business Credit Card</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.42	Nonpriority creditor's name and mailing address <b>Yelp, Inc.</b> <b>Attn: Managing Agent</b> <b>140 New Montgomery</b> <b>San Francisco, CA 94105</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$750.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number _____		
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim: <u>Ad and Promotional Services</u></b>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Capital One</b> <b>Attn: Managing Agent</b> <b>4851 Cox Road</b> <b>Glen Allen, VA 23060</b>	Line <u>3.7</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.2	<b>Cintas Corporation</b> <b>Attn: Managing Agent</b> <b>1003 Twin Creeks Ct.</b> <b>Durham, NC 27703</b>	Line <u>3.12</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.3	<b>Inland Seafood</b> <b>Attn: Managing Agent</b> <b>1651 Montreal Circle</b> <b>Atlanta, GA 30084</b>	Line <u>3.22</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.4	<b>Wells Fargo Bank</b> <b>Attn: Managing Agent</b> <b>101 N. Phillips Ave.</b> <b>Sioux Falls, SD 57104</b>	Line <u>3.40</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.5	<b>Yadkin Bank</b> <b>Attn: Managing Agent</b> <b>166 Main St.</b> <b>Greenville, PA 16125</b>	Line <u>3.41</u>	—
		<input type="checkbox"/> Not listed. Explain _____	

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	<b>21,000.00</b>
5b.	+	<b>390,618.00</b>
5c.	\$	<b>411,618.00</b>

Fill in this information to identify the case:

Debtor name ***Black Sheep Food Group, LLC***United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **17-04372-5** Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

***Lease of Commercial Space***

State the term remaining

***2 years******Ashworth Family Limited Partnership  
Attn: Managing Agent  
PO Box 98  
Cary, NC 27512***

List the contract number of any government contract

2.2. State what the contract or lease is for and the nature of the debtor's interest

***Equipment Lease***

State the term remaining

***month to month******Auto-Chlor  
Attn: Managing Agent  
3428 Benchmark Drive  
Ladson, SC 29456***

List the contract number of any government contract

2.3. State what the contract or lease is for and the nature of the debtor's interest

***Ice Machine Lease***

State the term remaining

***month to month******Empire Cooler Service, Inc.  
Attn: Managing Agent  
940 W. Chicago Ave.  
Chicago, IL 60642***

List the contract number of any government contract

2.4. State what the contract or lease is for and the nature of the debtor's interest

***Commercial Lease***

State the term remaining

***5 years******RI Preston Investors  
Attn: Managing Agent  
127 Trellingwood Dr.  
Morrisville, NC 27560***

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name ***Black Sheep Food Group, LLC***

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) ***17-04372-5*** Check if this is an amended filing

## Official Form 206H

### Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

#### 1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 <b><i>Bank of America</i></b>	<b><i>Attn: Managing Agent 100 North Tryon St. Charlotte, NC 28202</i></b>	<b><i>Bank of America</i></b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <b><i>3.6</i></b> <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name ***Black Sheep Food Group, LLC***

United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) ***17-04372-5***

Check if this is an amended filing

## Official Form 207

### Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

#### Part 1: Income

##### 1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

**From the beginning of the fiscal year to filing date:**

From **1/01/2017** to **Filing Date**

Operating a business

**\$1,300,000.00**

Other ***Restaurant***

**For prior year:**

From **1/01/2016** to **12/31/2016**

Operating a business

**\$2,366,740.00**

Other ***Restaurant***

**For year before that:**

From **1/01/2015** to **12/31/2015**

Operating a business

**\$2,123,939.88**

Other ***Restaurant***

##### 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

#### Part 2: List Certain Transfers Made Before Filing for Bankruptcy

##### 3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer  
Check all that apply

Debtor Black Sheep Food Group, LLCCase number (if known) 17-04372-5

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. <b>SOS Capital Inc.</b> <i>Attn: Managing Agent</i> <b>540 Madison Ave.</b> <b>New York, NY 10022</b>	<b>37 Payments of \$544</b>	<b>\$20,128.00</b>	<input checked="" type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. <b>Richmond Capital Group, LLC</b> <i>Attn: Managing Agent</i> <b>125 Maiden Lane Suite 501</b> <b>New York, NY 10038</b>	<b>37 payments</b>	<b>\$36,963.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. <b>Power Up Lending Group, Ltd</b> <i>Attn: RICHARD S. NAIDICH, ESQ.</i> <b>111 Great Neck Road Suite 214</b> <b>Great Neck, NY 11021</b>	<b>37 payments</b>	<b>\$43,166.79</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.4. <b>YES Funding Services, LLC</b> <i>Attn: Managing Agent</i> <b>122 E. 42nd St. Suite 2112</b> <b>New York, NY 10168</b>	<b>34 Payments</b>	<b>\$33,966.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.5. <b>Yellowstone Capital, LLC</b> <i>1 Evertrust Plaza</i> <b>Jersey City, NJ 07302</b>	<b>37 Payments</b>	<b>\$15,355.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.6. <b>LG Funding, Services</b> <i>Attn: Managing Agent</i> <b>1218 Union St. Suite 2</b> <b>Brooklyn, NY 11225</b>	<b>7 Payments</b>	<b>\$14,000.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.7. <b>Queen Funding, LLC</b> <i>Attn: Managing Agent</i> <b>2221 NE 164 St</b> <b>North Miami Beach, FL 33160</b>	<b>19 Payments</b>	<b>\$9,481.00</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.8. <b>Kabbage Loans</b> <i>Attn: Managing Agent</i> <b>925B Peachtree Street NE</b> <b>Atlanta, GA 30309</b>	<b>6/23/17 \$35,000 7/17/17 \$13,891.69</b>	<b>\$48,891.69</b>	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address	Dates	Total amount of value	Reasons for payment or transfer
Relationship to debtor			

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. <b>Richmond Capital Group, LLC v Debtor</b>	<b>Recording of Confession of Judgment</b>	<b>New Jersey</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. <b>Cap Call, LLC v Debtor</b>	<b>Recording of Confession of Judgment</b>	<b>New Jersey</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3. <b>SOS Capital Inc. v Debtor</b>	<b>Recording of Confession of Judgment</b>	<b>New Jersey</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

Debtor Black Sheep Food Group, LLCCase number (if known) 17-04372-5 None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.			List unpaid claims on Official Form 106A/B ( <i>Schedule A/B: Assets – Real and Personal Property</i> ).

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
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**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

 None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

 None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

 Does not apply

Address	Dates of occupancy From-To
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**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- No. Go to Part 9.  
 Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- No.  
 Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
<b>Ample Storage Attn: Managing Agent 120 James Jackson Ave Raleigh, NC 27613</b>	<b>Tom Havrish</b>	<b>Old files, Christmas Decorations, Breadslicer, Coolers for Catering</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- No.  
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
-----------------------	-------------------------------------	--	------------------------

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Date of service From-To
------------------	----------------------------

Debtor Black Sheep Food Group, LLCCase number (if known) 17-04372-5**Name and address****Date of service  
From-To****11/2013- 12/2016**

26a.1. **Burns & Bynum**  
**3020 Weston Pkwy #101**  
**Cary, NC 27513**

26a.2. **Maestri Financial Services**  
**1405 HillCroft Court**  
**Apex, NC 27502**

**9/2015-12/2016**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

**Name and address****If any books of account and records are unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Tom Havrish</b>	<b>1432 VanPage Blvd</b> <b>Cary, NC 27513</b>	<b>Managing Member</b>	<b>100</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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Debtor Black Sheep Food Group, LLCCase number (if known) 17-04372-5

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 <b>Thomas Havrish</b> Attn: Managing Agent 1432 Van Page Blvd Raleigh, NC 27607	Wages \$48,461.50 2017 (1/2017-9/2017) Wages \$13,500 2016 (9/2016-12/2017) Estimated	9/2016-9/2017	Managing Partner
<b>Relationship to debtor</b> <u>Managing Member</u>			
30.2 <b>Thomas Havrish</b> Attn: Managing Agent 1432 Van Page Blvd Raleigh, NC 27607	Owner Draws \$6,900	1/2017-9/2017	Managing Member
<b>Relationship to debtor</b> <u>Managing Member</u>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No  
 Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No  
 Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 20, 2017

/s/ Thomas S. Havrish

Signature of individual signing on behalf of the debtor

Thomas S. Havrish

Printed name

Position or relationship to debtor Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No  
 Yes

**United States Bankruptcy Court**  
**Eastern District of North Carolina**

In re Black Sheep Food Group, LLC

Debtor(s)

Case No. 17-04372-5  
Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>0.00</u>
Prior to the filing of this statement I have received .....	\$ <u>0.00</u>
Balance Due .....	\$ <u>0.00</u>

2. \$ 0.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify):

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

*Filing motions to avoid npm security interest in HHG or tools of the trade; filing motions to avoid judicial liens; assisting the debtor in negotiating reaffirmation agreements; filing motions to continue (for which a flat fee of \$50.00 shall be paid); and amending schedules as needed.*

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

*Representation of the debtor(s) in any dischargeability actions, including student loan discharge issues, and other adversary proceedings; representation of the debtor in contested judicial or npm lien avoidance matters; only contested proceedings concerning the right of the IRS to continue to garnish or offset social security benefits; section 707(b) motions to dismiss, representation of the debtor in contested motions for relief from stay; representation of the debtor in objections to exemptions, filing motions to redeem collateral (\$200.00 to \$600.00 depending on level of opposition to motion); If the debtor(s) chooses to employ the attorney in any of these matters, the debtor shall compensate the attorney at the hourly rate of \$250.00 per hour, unless specifically provided for otherwise herein.*

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 20, 2017

Date

/s/ William F. Braziel III

William F. Braziel III 39541

*Signature of Attorney*

**Janvier Law Firm, PLLC**

**311 East Edenton Street**

**Raleigh, NC 27601**

**919-582-2323 Fax: 866-809-2379**

*Name of law firm*

United States Bankruptcy Court  
Eastern District of North Carolina

In re **Black Sheep Food Group, LLC**

Debtor(s)

Case No. **17-04372-5**  
Chapter **11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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**-NONE-**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **September 20, 2017**

Signature **/s/ Thomas S. Havrish**  
**Thomas S. Havrish**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*